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| Minnesota Pollution Control Agency (MPCA), 520 Lafayette Road North, St. Paul, MN 55155-4194 | Notification of spreading petroleum-contaminated soil at a land treatment site  Petroleum Remediation Program  Guidance document 3-06  Doc Type: Environmental Development/Guidance |

Instructions:Use this form to notify the Minnesota Pollution Control Agency (MPCA) that petroleum-contaminated soil (PCS) approved for land treatment has been spread and incorporated. This form must be completed and submitted to the MPCA within 10 days following spreading.

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| Land treatment site ID: | PRE |  | Leak site or other site ID: | LS00 |  |

1. Background

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| **Land treatment site owner** | | | | | | | | |
| Individual or corporate name: | | | |  | | | | |
| Mailing address: | | |  | | | | | |
| City: |  | | | | State: |  | Zip code: |  |
| Email address: | |  | | | | | Phone number: |  |

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| **Land treatment site operator** | | | | | | | | |
| Individual or corporate name: | | | |  | | | | |
| Mailing address: | | |  | | | | | |
| City: |  | | | | State: |  | Zip code: |  |
| Email address: | |  | | | | | Phone number: |  |

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| **Responsible party information for soil batch** | | | | | | | | |
| Individual or corporate name: | | | |  | | | | |
| Mailing address: | | |  | | | | | |
| City: |  | | | | State: |  | Zip code: |  |
| Email address: | |  | | | | | Phone number: |  |

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| **Person completing application** | | | | | | | | |
| Individual or corporate name: | | | |  | | | | |
| Mailing address: | | |  | | | | | |
| City: |  | | | | State: |  | Zip code: |  |
| Email address: | |  | | | | | Phone number: |  |

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| **Location of land treatment site** | | | | | | | | | | | | | |
| Legal description: |  | ¼ of |  | ¼ of Section: |  | | Township: | |  | N | Range: |  | W |
| Township name: |  | | | | | County: | |  | | | | | |

**Soil application information**

**Double click checkboxes to select *Checked* and then select *OK*.**

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| Date of MPCA approval letter for the batch of soil (mm/dd/yyyy): | | | | |  | | | Date PCS was spread: | |  |
| Volume of soil spread (cubic yards): |  | | c/y | | | Spreading thickness (inches): | | |  | |
| Area of land used (square feet or acres): | |  | |  | | | | | | |
| Was the soil tilled within 48 hours of PCS application? | | | | Yes  No | | | | | | |
| Was nitrogen and/or phosphorus incorporated during soil batch application? | | | | | | | Yes  No | | | |
| If yes, describe the type of fertilizer used and the rate of application: | | | | | | | | | | |
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1. Site map and supporting information

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| Attach the following:  **Double click checkboxes to select *Checked* and then select *OK*.** | |
|  | Site map (scale: 1 inch = 50 feet) including: |
|  | 1. Borders of land treatment site (indicate dimensions of each side in feet); |
|  | 1. Actual plot used for this batch of soil (label dimensions in feet); and |
|  | 1. All other plots previously used for land treatment (label dimensions in feet and indicate with leak site number). |

1. Local officials

A copy of this form must be sent to the appropriate local government officials for the location of the land treatment site before or simultaneously with submittal to the MPCA.

**County official**

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| Individual name: | | | |  | | | | |
| Title: | |  | | | | | | |
| Mailing address: | | | |  | | | | |
| City: |  | | | | State: |  | Zip code: |  |
| Email: | | |  | | | | Phone: |  |

**City, Township or Tribal government official**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Individual name: | | | |  | | | | |
| Title: | |  | | | | | | |
| Mailing address: | | | |  | | | | |
| City: |  | | | | State: |  | Zip code: |  |
| Email: | | |  | | | | Phone: |  |

1. Submission of form

Submit the completed form and all attachments to the Petroleum Remediation Program via [MN.SoilTreatment.MPCA@state.mn.us](mailto:MN.SoilTreatment.MPCA@state.mn.us), and to the project manager of the leak site from which the PCS was generated.